

FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

IN THE UNITED STATES DISTRICT COURT  
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

(1) Terrell Marshall ND6745 :  
(Name of Plaintiff) (Inmate Number) :  
SCI Frackville 17932 :  
301 Morea Road, Frackville, PA :  
(Address) :

(2) \_\_\_\_\_ :  
(Name of Plaintiff) (Inmate Number) :  
\_\_\_\_\_  
(Address) :

\_\_\_\_\_  
(Case Number)

(Each named party must be numbered,  
and all names must be printed or typed)

vs.

CIVIL COMPLAINT

(1) Nelson Anthony Iannuzzi :  
(2) Hresh Pandya :  
(3) \_\_\_\_\_ :  
(Names of Defendants) :

(Each named party must be numbered,  
and all names must be printed or typed)

**FILED**  
HARRISBURG, PA  
MAR 26 2020  
PER \_\_\_\_\_  
PER \_\_\_\_\_  
DEPUTY CLERK

TO BE FILED UNDER: ☒ 42 U.S.C. § 1983 – STATE OFFICIALS

☐ 28 U.S.C. § 1331 – FEDERAL OFFICIALS

I. PREVIOUS LAWSUITS

A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case Number including year, as well as the name of the judicial officer to whom it was assigned:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

A. Is there a prisoner grievance procedure available at your present institution? ☒ Yes ☐ No

B. Have you fully exhausted your available administrative remedies regarding each of your present Claims? ☒ Yes ☐ No

C. If your answer to "B" is Yes:

1. What steps did you take? I sent A grievance I got A response I Appeal to the facility manager, I got A response, I Appeal to Central office I got A response
2. What was the result? In one response they Admitted to misdiagnosis of my injury. But say it's no wrong doing Done.

D. If your answer to "B" is No, explain why not: \_\_\_\_\_

## III. DEFENDANTS

(1) Name of first defendant: Nelson Anthony Iannuzzi  
Employed as Certified register Nurse at SCI Frackville  
Mailing address: 1111 ALTAMONT BLVD, Frackville, PA, 17931

(2) Name of second defendant: Hrush Pandya  
Employed as Dr. PANDYA at SCI Frackville  
Mailing address: 1111 ALTAMONT BLVD Frackville, PA, 17931

(3) Name of third defendant: \_\_\_\_\_  
Employed as \_\_\_\_\_ at \_\_\_\_\_  
Mailing address: \_\_\_\_\_

(List any additional defendants, their employment, and addresses on extra sheets if necessary)

## IV. STATEMENT OF CLAIM

(State here as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets if necessary.)

1. On April 1st 2018 I suffered a basketball injury To my left lower leg in SCI Frackville yard. after that I experience misdiagnosis and negligence

- For 6 days straight which I wrote a grievance for every event that occurred with Nelson Iannuzzi denying me outside access to a hospital to be properly diagnosed.
2. Because of the complaints And being seen by a RN that seen my ~~leg~~ <sup>leg</sup> I was sent to a hospital on the 7th day. 5 days go pass And I experienced the same thing with Nelson Iannuzzi with my injury as it gets worse I write more grievance. On April 12th I was sent to Pottsville hospital And was diagnosed that my injury got worse. Dr. Huresh Pandya neglected to send me to and infirmary and sent me back to Frackville. Knows my injury got seriously worse. Later that night I was rushed to Geisinger ER for ~~more~~ bleeding internally at the joint. I was diagnose to have Compartment Syndrome which lead to 3 surgeries permanent muscle loss, permanent nerve damage. A long incision with staples and stitches = see Full Story Attachment

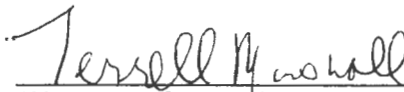
## V. RELIEF

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

1. I requesting 1,000,000 dollars for medical mal-practice misdiagnosis and negligence, pain and suffering, mental stress. And for future medical needs for the rest of my life dealing with my leg injury
2. I'm requesting to be medically Z-code to A single bed cell while I'm incarcerated with no cell mate do to my disability to my leg for safety and fear for re-injury. Permanent bottom tier status Permanent bottom bunk status
3. I'm requesting to be moved to another SCI Jail with in the same travel range for my family from Philadelphia for the main reason of retaliation of SCI Frackville. I'm requesting SCI Chester or SCI Phoenix to be transferred to for fear of retaliation and it's still close for my family to visit.

I declare under penalty of perjury that the forgoing is true and correct.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

A handwritten signature in black ink, appearing to read "Terrell Marshall", is written over a horizontal line.

(Signature of Plaintiff)